

OFFICE OF THE BUILDING & ZONING OFFICIAL VOLUNTOWN, CT



115 Main Street
P.O. Box 96
Voluntown, CT 06384
Telephone: 860-376-3867
Fax: 860-376-3295

Application for Building Permit

Single Family, Multi-Family, Additions, Commercial, Industrial Structures

This application for permit is made pursuant to section 107.0 of the Basic Building Code of the State of Connecticut and is to be used for all construction requiring a permit under said code. **THIS IS NOT A BUILDING PERMIT.** Any permit granted pursuant to this application will be valid for only the type of work noted on this application. Detailed plans and specifications must be submitted for all construction as determined by this office.

STREET ADDRESS <hr/> Check one: Rural () Village () Commercial Overlay () Assessors Map/Block/Lot # _____ Name of subdivision (if any) _____ Lot # _____ Section _____	USE OF PROPOSED STRUCTURE Single Family Residence Cape () Ranch () Colonial () Other () _____ Multi-Family Dwelling (# of units) _____ Commercial (building use) _____ Addition: _____ Industrial: _____ Other: _____																		
Owner Name: _____ Mailing Address: _____ Phone: _____ Email: _____	<table style="width: 100%;"> <tr> <td style="width: 60%;">Structure Dimensions</td> <td style="width: 40%;">Garage</td> </tr> <tr> <td colspan="2">(do not include garage)</td> </tr> <tr> <td>Width: _____</td> <td>Dimensions: _____</td> </tr> <tr> <td>Depth: _____</td> <td># of bays: _____</td> </tr> <tr> <td>Height: _____</td> <td>Attached () Detached ()</td> </tr> <tr> <td>Stories: _____</td> <td>Under house ()</td> </tr> <tr> <td>1st Floor Area _____ sq ft</td> <td>Bonus Room Above ()</td> </tr> <tr> <td>2nd Floor Area _____ sq ft</td> <td>Size: _____</td> </tr> <tr> <td>Lot Area _____ sq ft</td> <td>Square Ft _____</td> </tr> </table>	Structure Dimensions	Garage	(do not include garage)		Width: _____	Dimensions: _____	Depth: _____	# of bays: _____	Height: _____	Attached () Detached ()	Stories: _____	Under house ()	1 st Floor Area _____ sq ft	Bonus Room Above ()	2 nd Floor Area _____ sq ft	Size: _____	Lot Area _____ sq ft	Square Ft _____
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1 st Floor Area _____ sq ft	Bonus Room Above ()																		
2 nd Floor Area _____ sq ft	Size: _____																		
Lot Area _____ sq ft	Square Ft _____																		
Contractor Copies of License and Insurance are required. Name: _____ Address: _____ Phone: _____ Email: _____ License: _____	Interior Details Please list all types: Exterior: Vinyl () Clapboard () Brick () Other () _____ Interior Flooring: Carpet () Tile () Wood () Other () _____ # of Bedrooms: _____ # of Bathrooms _____ Fireplace (wood, gas etc.): _____ Type of Heat: _____ Air Conditioning Y/N																		

PLEASE COMPLETE THE FOLLOWING ON THE GRAPH PROVIDED BELOW:

**** To be done in addition to the submission of the site plan. ****

1. Approximate outline of proposed structure.
2. Distance from proposed structure to property line; if the lot is irregularly shaped, indicate approximate shape.
3. Abutting streets.
4. Location of well or water line
5. Driveway
6. Curtain drains, if any.
7. Septic tank.
8. Layout of leaching system.
9. Any outstanding topographical feature such as ledge, outcroppings, ponds, swamps, streams, gullies, steep slopes, large trees etc.

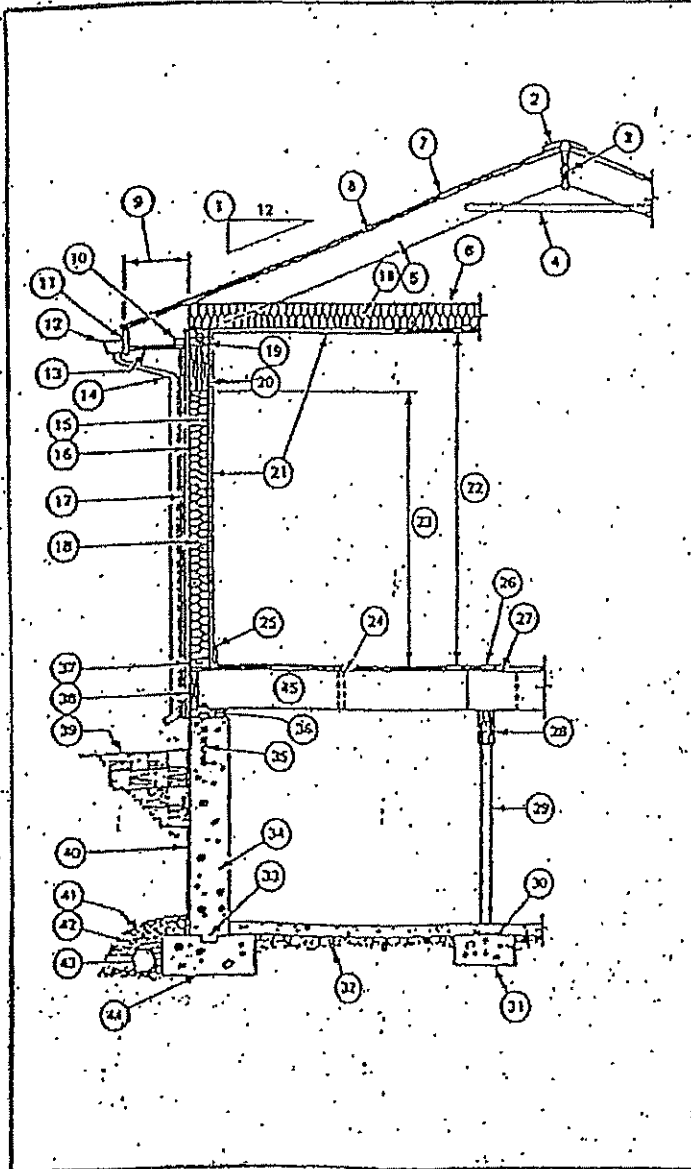
Rear Yard
_____ Feet

Side Yard
_____ Feet

Side Yard
_____ Feet

Front Property Line
_____ Feet

Indicate the name of the road the structure faces: _____



	PARTS & SECTION	SIZE
1	Pitch Triangle	
2	Ridge Cap/Vent	
3	Ridge Board	
4	Collar Tie	
5	Rafter	
6	Ceiling Joist	
7	Roofing	
8	Sheathing	
9	Overhang or Tail	
10		
11	Facia	
12	Gutter	
13	Soffit/Vent	
14	Leader or Downspout	
15	Stud	
16	Sheathing	
17	Siding	
18	Insulation – Walls	
18	Insulation – Ceiling	
19	Plate	
20	Header	
21	Gypsum Board or Plaster	
22	Finish Height	
23	Window & Door Height	
24	Bridging	
25		
26	Finish Floor	
27	Subfloor	
28	Carrying Beam or Girder	
29	Column	
30	Concrete Floor	
31	Column Footing	
32	Gravel/Depth	
33	Footing Key	
34	Foundation Wall	
35	Anchor Bolt	
36	Sill	
37	Shoe or Sole	
38	Header	
39	Grade	
40	Water Proofing	
41	Building Paper	
42	Crushed Stone	
43	Footing Drain	
44	Footing	
45	Floor Joist	
	Depth of Footing	
	Size of Bedroom Windows	
	Type of Glass	
	Type of Heat	
	Plumbing	Yes No
	Sewer/Public	Yes No
	Septic Tank	Yes No
	Electrical	
	Ground Fault Interrupter	
	Smoke Detector	

I hereby certify that I am the owner or authorized agent of the owner of the property herein described. I will conform to the applicable requirements of the Basic Building Code and Public health Code of the State of Connecticut, the Ordinances of the Town of Voluntown and to any requirements not specifically covered by these Codes and Ordinances, but deemed by the Building Official and/or Town Engineer to be essential structural, fire or sanitary protection. It is understood that neither the Town of Voluntown nor any authorized agent assumes any responsibility for construction or maintenance of any facility built under permit for which this application is made.

I grant permission to the Building Official and Assessor to enter the property to do required inspections. I hereby certify that the proposed work will conform to the Basic Building Code and all Codes as adopted by the State of Connecticut. I understand that under the Connecticut amendment of the Building Code, Section 119.1, A CERTIFICATE OF OCCUPANCY/COMPLIANCE IS REQUIRED FOR ALL PERMITS ISSUED.

Applicants Signature: _____

Check here if you are an authorized Agent or Contractor ()

Date of Application: _____

Estimated Cost of Proposed Structure: \$_____

(Estimated cost must include foundation, structure, materials and may or may not include plumbing, electrical, HVAC cost or materials. These may be paid at a later date with specific permits. Be sure NOT include, septic, well, excavation, gravel, land etc.

Office Use Only

Date Received: _____ Date Paid: _____

Building Permit Fee: \$_____

CT Educational Fee: \$_____

Zoning Fee: \$_____

Certificate of Occupancy Fee: \$_____

Building Fees: \$_____

Septic Fees: \$_____

Total Fees Due: \$_____

Check Number: _____

Received By: _____

Check List:

- | | | |
|----------------------|---------------------------|---------------------------------------|
| () MEC | () Assessors Card | () Contractors License/Insurance |
| () Tax Form | () House Plans () | () Wetlands/Zoning Approvals |
| () Driveway Bond | | () Site Plan & Septic Application |

OFFICE OF THE BUILDING & ZONING OFFICIAL VOLUNTOWN, CT

Peter Zvingilas
Building & Zoning Official



115 Main Street
P.O. Box 96
Voluntown, CT 06384
Telephone: (860) 376-3867
Fax: (860) 376 • 3295

THIS FORM MUST BE SIGNED OFF BY THE TAX COLLECTOR'S OFFICE PRIOR TO APPLYING FOR ALL BUILDING PERMITS.

Pursuant to Ordinance "Town of Voluntown Ordinance on Delinquent Taxes & Denial of Permits, Contracts & Vendor Payments". Section II B Pg 77-At the time any such application for a certificate or permit is filed, the applicant shall submit to the appropriate Town Official with the authority to issue such certificate of permit, sufficient written evidence from the Tax Collector that there are no delinquent amounts due to the Town from the owner of the real estate property which is the subject of the application.

Date: _____

Applicants Name: _____

Property Owner's Name: _____

Street Address: _____

BELOW THIS LINE IS FOR OFFICE USE ONLY:

TAX STATUS:

() PAID UP TO DATE

() DELINQUENT () PAYMENT PROGRAM APPROVED

Tax Status Verified: _____

Tax Collector

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NEW BUILDING REQUIREMENTS

1. Post driveway apron bond of \$1000 with the Selectmen's Office. A copy of the street card must be submitted with your application for bond. For state roads/highways, you must contact the State of Connecticut DOT.
2. Submission of the approvals from Uncas Health District are also required prior to issuance of a Building Permit. Please note, prior obtaining a Certificate of Occupancy a permit to discharge from Uncas Health must be submitted to the Building & Land Use office.
3. Building application completed and submitted along with one set of building plans for single family dwelling and two sets for multi-family or commercial buildings.

All permit applications must include the following:

- () Current Model Energy Compliance Report (RES Check)
- () Foundation Plan
- () All uplift anchoring/hold downs to be shown on plan
- () Floor plan, showing dimensions and uses of each room/space
- () Ventilation requirements
- () Sizes/Elevations of all windows and doors
- () Sizing/Spacing of floor, ceiling joists, rafters, carrying beams
- () Copies of current licensure and liability insurance of each contractor/trades person covered under the permit
- () Copies of any approved Planning & Zoning / Wetland Variances given for proposed building site

The Building Official reserves the right to require any additional information deemed necessary

All plans must have required drawings in accordance with current State of Connecticut Building Codes. Any specially designed floor, beam or rafter must have engineer/architect signed, sealed and dated specification sheet

Inspections are required for ALL permits. Requests for inspections should be made at least 24 hours in advance. Any work done without a permits/approvals are subject to fines. Coordination of inspections, Fire Marshall, Building/Zoning Inspector, Town Planner, Wetlands Agent and Uncas Health is the responsibility of the home

Important Contact Information

Selectmen's Office: 860.376.5880
Uncas Health: 860.823.1189
Building & Zoning Office: 860.376.3867

DOT: 860.823.3229
Wetlands Agent: 860.428.7992